

APPLICATION FOR TAX ABATEMENT

CITY OF READING, PENNSYLVANIA

CONTROL NO. _____

SECTION 1 PROPERTY INFORMATION:

County PIN _____

Address _____
STREET CITY STATE ZIP

Check all boxes that apply:

- ☐ Residential ☐ Mixed Use
☐ Business ☐ Vacant Land

If residential, how many units _____

SECTION 2 PROPERTY OWNERSHIP INFORMATION:

Owner _____
FIRST NAME LAST NAME M.I.

Mailing Address _____
STREET CITY STATE ZIP

Phone Number _____

SECTION 3 TAX ABATEMENT REQUEST

(Check only one box)

- ☐ Local Economic Revitalization Tax Assistance Program (city)
☐ Residential Tax Abatement Program

I certify that I am the owner or authorized representative of the above-described property.

OWNER SIGNATURE AUTHORIZED REPRESENTATIVE DATE

Any information falsely provided will result in termination of all rights to tax abatement.

DO NOT WRITE BELOW THIS LINE

To Be Completed By the Assessment Agency

City of Reading Authorization _____

Current City Assessment _____ ☐ Interim Assessment

New City Assessment _____ ☐ Regular Assessment

Increase in Assessment _____